

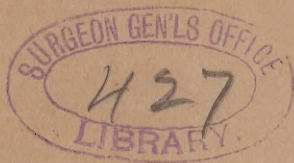
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BY

HAROLD WILLIAMS, M. D.

*Reprinted from the Boston Medical and Surgical Journal
of April 9, 1891.*



BOSTON:
DAMRELL & UPHAM, PUBLISHERS,
283 Washington Street.
1891.

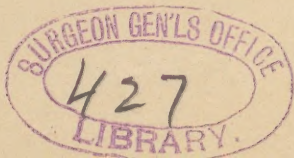
S. J. PARKHILL & CO., PRINTERS
BOSTON

HYPNOTISM.

BY HAROLD WILLIAMS, M.D.

AT a meeting of the Boston Society for Medical Improvement held on January 26th, a paper on hypnotism was read by Dr. Hamilton Osgood, and subsequently discussed by members of the Society. Dr. Osgood's views on this subject are so well-known to me that their reiteration on this occasion did not surprise me. But I confess that I was surprised in reading the discussion of that paper to find that no one there present considered the subject of sufficient importance to cause him to raise his voice in protest against what I believe to be a wholly unjustifiable and distinctly dangerous therapeutic measure. If Dr. Osgood or men of his high character and attainments, were the only exponents or disciples of the French school in the Massachusetts Medical Society or in the State of Massachusetts, I should not regard it as my duty to challenge his statements nor his hypnotism; but unfortunately they are not. Other and less scrupulous followers of the French school are springing up among us and several painful instances of the abuse of this dangerous agent have come to my knowledge, which compel me to protest against the rapidly increasing employment of hypnotism.

The benefits to be derived from hypnotism, according to Dr. Osgood, are from what is called hypnotic suggestion; and the process may be briefly described as follows: The patient is hypnotized, and during the hypnotic sleep she is told that on awakening her symptoms will disappear. (I say *she*, because the subject is



generally a woman.) She is then awakened, and her symptoms have disappeared, to a greater or less extent, and for a longer or shorter time. On the reappearance of her symptoms she is again hypnotized, and again relieved, and in many instances repair takes place during the immunity from symptoms. It is applicable, according to Dr. Osgood, to pain of every sort, from the dull torment of the aching tooth to the agony of labor. It cures drunkenness, stuttering, the cocaine habit, hay-fever, irregular action of the heart and the pain of rheumatic gout; though, to quote Dr. Osgood's naïve words, "Hypnotic suggestion did but little permanently for the painful and deformed joints." This is substantially what Dr. Osgood claims for hypnotism, or, in other words, he claims that it is applicable to every form of subjective symptom, to all functional diseases, and to the *symptoms* of organic disease. It is not claimed that by hypnotism we can accomplish anything that can be accomplished in no other way. On the contrary, hypnotism is only claimed by its advocates to accomplish what ether, chloral, the bromides, sulphonal, phenacetine, valerian, electricity, etc., will accomplish also. It is claimed to possess advantages, as a therapeutic measure, which are shared by a large class of drugs. These are, in brief, the advantages of hypnotism. Its disadvantages may be summarized as follows:

- (1) It is dangerous to the health of the patient, both in its immediate and remote effects.
- (2) It is dangerous to the community, and is liable to the greatest and most flagrant abuse.
- (3) It is dangerous to the physician and through him to the whole medical profession.

Now, to substantiate these assertions, which I believe to be a fair statement of the objections to hypnotism, let me first say that an hypnotic *séance* is not always

the harmless procedure which Dr. Osgood describes. Only last week a case was reported by Dr. Julius Solow in the New York *Medical Journal*, in which convulsions, aphasia and catalepsy, lasting for ten days or more, followed upon "an experiment with hypnotism." And its remote effects upon the patient are still more to be feared. In the first place it weakens the self-control of the patient, as is shown by the ease with which she is re-hypnotized. Every time that she is hypnotized facilitates the repetition of the process. She has lost her power of resistance against hypnotism. I have even known of cases in which by frequent repetition the patient could be hypnotized by the operator in an adjoining room.

What really occurs at the hypnotic *séance* is this: The operator tells his patient he is going to make her sleep. He looks at her fixedly; frowns at her or smiles at her confidently, with a smile which one patient describes as making her feel cold all over. He tells her she will soon be "as wax in his hands"; that she will soon become sleepy, but that she must not resist that drowsiness, for it is that which will enable him to cure her. Then he sits down before her, and requires her to look at some bright object; sometimes to look into his eyes. In this latter case he looks at the bridge of her nose; and he, by looking at one object, can sustain his gaze longer than she can while looking at two. Or he tells her to look into his eyes, and then comes very near to her, thus bringing a great strain upon the muscles of the eyeball. This is a favorite method, and if the operator happens to be myopic, as I have noticed to be the case with the most successful hypnotizers I have seen operate, he can sustain his gaze for a long time without strain, while the contrary is true of the patient with normal vision. This latter procedure, it will be seen, is closely analogous to

a popular method of overcoming sleeplessness, namely, that of shutting the eyes and turning them inward.

When the patient begins to become conscious that her gaze is weakening while that of the operator remains the same she thinks he is stronger than she is ; she begins to lose her equipoise and becomes terrified ; then the physician makes mysterious passes with his hands, or strokes her eyelids or her forehead. Sometimes he makes a blowing sound. Then he tells her that she is sleepy ; that she is almost hypnotized ; that she is hypnotized and by this time in most cases she is hypnotized. Now what has probably happened in this case is, that the operator has led her to distrust her own power of self-control. He has made her believe that she is going to sleep and by expectant attention she has gone to sleep. In other words she has hypnotized herself at the suggestion of another. But if we could look into her mind we should find that by a feeling of distrust of her power of control ; or by fear of the power of the operator ; or by terror, she has been hypnotized by exactly the same process employed by the rattle-snake.

If this is not the method as it is applied by Dr. Osgood I am very glad indeed to hear it ; but it is the method used by others whom I have seen practising hypnotism. Now, that power in virtue of which a person becomes hypnotized is a power inherent in the persons themselves. They could, in many instances, probably hypnotize themselves without the assistance of another if they only thought so. But they do not think so. They believe that the operator has an occult power over them ; that he *magnetizes* them ; that he *wills* them. They believe that he is stronger than they are and that if he commands they must obey. They yield up their wills to him and I maintain that any one who yields up his will to another has weakened his

mind by that submission. For the time he has lost the check of personal responsibility. The best subjects for hypnotism are hysterical, emotional, ill-controlled women, and I do not see how such persons can be lead to believe in and speculate about the mysterious and the occult without being permanently injured thereby. And believing that they are "mesmerized" or "willed" or influenced by the operator near at hand, the step is not a long one to believing that they can be "willed" or "mesmerized" or influenced by the operator at a distance. An instance of this belief recently came to my knowledge when I saw an emotional woman spring to her feet, rapidly pace the room, wildly gesticulating with her arms, laboring under the delusion that she was being treated by an operator at a distance. She declared that her legs were numb; that her arms were paralyzed. She believed in the so-called telepathy and was nearly beside herself at the time. Such a condition as she was in is not far removed from the borderland of emotional insanity and yet it is a condition of mind liable to be produced at any time in the subjects of the hypnotic experiment.

As I have said before, the power of becoming hypnotized is a power inherent in the patient herself. Any person who is led to believe that it is a power in the will of another is deceived, and the mind of such a person must be weakened by the acceptance of a false belief.

In substantiation of my second assertion, that hypnotism is subversive of good morals and liable to the greatest and most dangerous abuse, it seems to me little need be said. A woman who can be induced by hypnotism to perform the peculiar and unusual acts which have become familiar to us from the columns of the medical journals, can also be induced to perform other and more hurtful acts. All that is requisite

is the *animus* of the operator ; and it does not require a wide knowledge of human character to know that this *animus* will be forthcoming. Three instances of the asserted abuse of hypnotism have come to my knowledge, though the evidence in these cases is, as it of course always must be, incomplete and untrustworthy. In one of these cases, the subject, a woman, assured me as her physician, that her husband had hypnotized her and through the influence of suggestion had coerced her into the performance of an act that was repugnant to her, and which I need not describe here. Of course, such an assertion as this is valueless, because the woman had no means of knowing what her husband had suggested while she was in the hypnotic state, and the husband if questioned would probably deny that he had so influenced his wife. Yet he admits that he frequently practises hypnotism upon her, and upon other persons as well. I cite this case as showing the difficulty of substantiating charges of this nature, a difficulty which contains a two-fold menace since it enables crimes to be perpetrated with impunity, and since it opens the door to the blackmailer and the slanderer. And I can also say in this connection that the wife's mind has evidently deteriorated since her husband has practised hypnotism upon her, and that when I remonstrated with him and pointed out what I believed to be the inevitable result of his experiments, he replied that "other Boston doctors practised hypnotism and declared it to be harmless." The other instances are accusations of a similar nature. The employment of hypnotism as a therapeutic measure is also dangerous to public morals, because, if sanctioned by regular physicians, it will be employed by charlatans and others, for mercenary and immoral purposes. They will use it more openly, and when it becomes better understood, more generally ; and the

fact that it is considered a legitimate agent by reputable physicians will be a defence for its employment by the disreputable. Whereas if it is discountenanced by the regular profession, who are well known to have the welfare of the public at heart, it will be practised less openly by charlatans, and those who employ it will be looked upon with suspicion.

It is dangerous to the physician who employs it, and through him to the good standing of the whole medical profession, because its nature is fraud, because its success depends upon charlatanism and deceit, and because, in most instances, to practice it successfully one must deceive his patient, and delude her into the belief that he has "the power over her," that he can "influence her" or "will her"; whereas, as I have shown before, he simply induces her to influence herself. The more mysterious he is, the more impressive his signs and frowns, the better actor he is, the more successful hypnotizer he is—in other words, the greater charlatan he has become. And I do not see how the employment of a fraudulent means can fail to lower the moral tone of the physician who employs it. He will become more and more accustomed to depend upon the influence of the imagination of his patients; more and more he will practise upon their credulity; and more and more will he become a charlatan, a humbug, a *poseur*. Let us recognize the force of the imagination by all means; let us employ it if we must; but let us remember that the one thing which most widely separates the regular practice of medicine from the practice of the charlatan is truthfulness and honesty; and I say, let us preserve our truthfulness, even at the expense of hypnotic experiments.

And a second source of danger to the physician is that by employing hypnotism he lays himself open to all sorts of charges by patients and their friends that

he makes unworthy use of hypnotic suggestion. Several instances where such insinuations have been circulated against physicians employing hypnotism have come to my ears.

To recapitulate, therefore, we find that in hypnotism we have a therapeutic agent which is injurious to the physician employing it; to the profession which sanctions it; to the patient upon whom it is practised and to the community which tolerates it. And we find, on the other hand, that it accomplishes nothing which other, both safer and better understood therapeutic agents, will not also accomplish. In other words, we find no reason why we should adopt hypnotism as a therapeutic agent and every reason why we should not.

THE BOSTON MEDICAL AND SURGICAL JOURNAL.

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PUBLISHED BY DAMRELL & UPHAM,
283 Washington St., Boston.

